

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 51

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

STATE AUTO EMPLOYEES FED PAC COMMITTEE OF STATE AUTOMOBILE MUTUAL INSURANCE COMP-ANY

A.

Full Name (Last, First, Middle Initial)

James Kunk

Mailing Address Huntington Center

City State Zip Code
 Columbus OH 43287

FEC ID number of contributing
federal political committee.

C

Name of Employer
State Auto Mutual Insuran-
ce Company

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 3 / 2 0 1 0

Transaction ID: 9772436

Amount of Each Receipt this Period

900.00

B.

Full Name (Last, First, Middle Initial)

Dennis Blank

Mailing Address 15078 Harbor Point West

City State Zip Code
 Thornville OH 43076

FEC ID number of contributing
federal political committee.

C

Name of Employer
State Auto Mutual Insuran-
ce Company

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 3 / 2 0 1 0

Transaction ID: 9772437

Amount of Each Receipt this Period

900.00

C.

Full Name (Last, First, Middle Initial)

David D'Antoni

Mailing Address 15821 Savona Way

City State Zip Code
 Naples FL 34110

FEC ID number of contributing
federal political committee.

C

Name of Employer
State Auto Financial Corp-
oration

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 3 / 2 0 1 0

Transaction ID: 9772438

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

2800.00

TOTAL This Period (last page this line number only)